

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines.

Millennium Pharmaceuticals Inc. PAC

ADDRESS (number and street)

Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** ▼ **CITY** ▲ **STATE** ▲ **ZIP CODE** ▲

IS THIS REPORT NEW (N) OR **AMENDED (A)**

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
- Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
- Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day **PRE-Election** Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S)

Election on / / in the State of

(d) 30-Day **POST-Election** Report for the: General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period / / through / /

10 / 01 / 2012 through 11 / 26 / 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Signature of Treasurer [Electronically Filed] Date / /

12 / 06 / 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only														FEC FORM 3X Rev. 12/2004
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Millennium Pharmaceuticals Inc. PAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="44866.50"/>	<input type="text" value="44866.50"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="51851.50"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="3463.50"/>	<input type="text" value="23948.50"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="55315.00"/>	<input type="text" value="68815.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="0.00"/>	<input type="text" value="13500.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="55315.00"/>	<input type="text" value="55315.00"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Millennium Pharmaceuticals Inc. PAC

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	3090.00	15230.00
(ii) Unitemized	373.50	8718.50
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	3463.50	23948.50
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	3463.50	23948.50
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	3463.50	23948.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	3463.50	23948.50

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	13500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	0.00	13500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	13500.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	3463.50	23948.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3463.50	23948.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Millennium Pharmaceuticals Inc. PAC

A. John Billias
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 Sankernando Lane
 City State Zip Code
 East Amherst NY 14051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Millennium Pharmaceuticals Inc. Health Systems Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2012
Transaction ID : 2012120413832-39
 Amount of Each Receipt this Period
 25.00

B. John Billias
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 Sankernando Lane
 City State Zip Code
 East Amherst NY 14051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Millennium Pharmaceuticals Inc. Health Systems Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2012
Transaction ID : 201212041391-39
 Amount of Each Receipt this Period
 25.00

C. John Billias
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 Sankernando Lane
 City State Zip Code
 East Amherst NY 14051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Millennium Pharmaceuticals Inc. Health Systems Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 15 / 2012
Transaction ID : 2012120413747-39
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Millennium Pharmaceuticals Inc. PAC

Full Name (Last, First, Middle Initial) A. Timothy Bisson		Date of Receipt
Mailing Address 23 Bevin Rd		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code
Northport	NY	11768-1169
FEC ID number of contributing federal political committee.		Transaction ID : 2012120413832-47
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
Millennium Pharmaceuticals Inc.	Director, Regional Account Management	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="400.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Timothy Bisson		Date of Receipt
Mailing Address 23 Bevin Rd		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City	State	Zip Code
Northport	NY	11768-1169
FEC ID number of contributing federal political committee.		Transaction ID : 201212041391-47
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
Millennium Pharmaceuticals Inc.	Director, Regional Account Management	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="400.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Timothy Bisson		Date of Receipt
Mailing Address 23 Bevin Rd		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code
Northport	NY	11768-1169
FEC ID number of contributing federal political committee.		Transaction ID : 2012120413747-47
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
Millennium Pharmaceuticals Inc.	Director, Regional Account Management	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="400.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="75.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Millennium Pharmaceuticals Inc. PAC

Full Name (Last, First, Middle Initial)
A. Kelly Bodiford

Mailing Address 710 Conesus Ln

City State Zip Code
 Winter Springs FL 32708-5519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Millennium Pharmaceuticals Inc. Sr. Oncology Sales Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2012
Transaction ID : 2012120413832-42

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
B. Kelly Bodiford

Mailing Address 710 Conesus Ln

City State Zip Code
 Winter Springs FL 32708-5519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Millennium Pharmaceuticals Inc. Sr. Oncology Sales Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2012
Transaction ID : 201212041391-42

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
C. Kelly Bodiford

Mailing Address 710 Conesus Ln

City State Zip Code
 Winter Springs FL 32708-5519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Millennium Pharmaceuticals Inc. Sr. Oncology Sales Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 15 / 2012
Transaction ID : 2012120413747-42

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Millennium Pharmaceuticals Inc. PAC

Full Name (Last, First, Middle Initial) A. Jennifer Boldizar		Date of Receipt M M / D D / Y Y Y Y Y 10 / 15 / 2012
Mailing Address 3618 Swans Landing Dr		Transaction ID : 2012120413832-19
City Land O Lakes	State FL	Zip Code 34639-4439
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00	
Name of Employer Millennium Pharmaceuticals Inc.	Occupation Sr. Oncology Sales Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

Full Name (Last, First, Middle Initial) B. Jennifer Boldizar		Date of Receipt M M / D D / Y Y Y Y Y 10 / 30 / 2012
Mailing Address 3618 Swans Landing Dr		Transaction ID : 201212041391-19
City Land O Lakes	State FL	Zip Code 34639-4439
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00	
Name of Employer Millennium Pharmaceuticals Inc.	Occupation Sr. Oncology Sales Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

Full Name (Last, First, Middle Initial) C. Jennifer Boldizar		Date of Receipt M M / D D / Y Y Y Y Y 11 / 15 / 2012
Mailing Address 3618 Swans Landing Dr		Transaction ID : 2012120413747-19
City Land O Lakes	State FL	Zip Code 34639-4439
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00	
Name of Employer Millennium Pharmaceuticals Inc.	Occupation Sr. Oncology Sales Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Millennium Pharmaceuticals Inc. PAC

Full Name (Last, First, Middle Initial) A. Kevin Carlin		Date of Receipt M M / D D / Y Y Y Y Y 10 / 15 / 2012 Transaction ID : 2012120413832-18
Mailing Address 1909 Craig St		Amount of Each Receipt this Period 105.00
City Raleigh	State NC	Zip Code 27608-2107
FEC ID number of contributing federal political committee. C		
Name of Employer Millennium Pharmaceuticals Inc.	Occupation Sales Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2205.00	

Full Name (Last, First, Middle Initial) B. Kevin Carlin		Date of Receipt M M / D D / Y Y Y Y Y 10 / 30 / 2012 Transaction ID : 201212041391-18
Mailing Address 1909 Craig St		Amount of Each Receipt this Period 105.00
City Raleigh	State NC	Zip Code 27608-2107
FEC ID number of contributing federal political committee. C		
Name of Employer Millennium Pharmaceuticals Inc.	Occupation Sales Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2205.00	

Full Name (Last, First, Middle Initial) C. Kevin Carlin		Date of Receipt M M / D D / Y Y Y Y Y 11 / 15 / 2012 Transaction ID : 2012120413747-18
Mailing Address 1909 Craig St		Amount of Each Receipt this Period 105.00
City Raleigh	State NC	Zip Code 27608-2107
FEC ID number of contributing federal political committee. C		
Name of Employer Millennium Pharmaceuticals Inc.	Occupation Sales Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2205.00	

SUBTOTAL of Receipts This Page (optional).....▶	315.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Millennium Pharmaceuticals Inc. PAC

Full Name (Last, First, Middle Initial)
A. Patrick Connelly

Mailing Address 4 Oatsfield Cir

City Penfield State NY Zip Code 14526-9554

FEC ID number of contributing federal political committee. **C**

Name of Employer Millennium Pharmaceuticals Inc. Occupation Sr. Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2012

Transaction ID : 2012120413832-12

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
B. Patrick Connelly

Mailing Address 4 Oatsfield Cir

City Penfield State NY Zip Code 14526-9554

FEC ID number of contributing federal political committee. **C**

Name of Employer Millennium Pharmaceuticals Inc. Occupation Sr. Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2012

Transaction ID : 201212041391-12

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
C. Patrick Connelly

Mailing Address 4 Oatsfield Cir

City Penfield State NY Zip Code 14526-9554

FEC ID number of contributing federal political committee. **C**

Name of Employer Millennium Pharmaceuticals Inc. Occupation Sr. Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 15 / 2012

Transaction ID : 2012120413747-12

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Millennium Pharmaceuticals Inc. PAC

A. Laura De La Garza
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 21150
 City Bedford State TX Zip Code 76095
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Millennium Pharmaceuticals Inc. Occupation Sr. Oncology Sales Specialist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **210.00**

Date of Receipt **11 / 15 / 2012**
Transaction ID : 2012120413747-15
 Amount of Each Receipt this Period **100.00**

B. Sandra DiCesare
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 Shelly Ln
 City Westford State MA Zip Code 01886-4522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Millennium Pharmaceuticals Inc. Occupation VP Commercial Operations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1050.00**

Date of Receipt **10 / 15 / 2012**
Transaction ID : 2012120413832-2
 Amount of Each Receipt this Period **50.00**

C. Sandra DiCesare
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 Shelly Ln
 City Westford State MA Zip Code 01886-4522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Millennium Pharmaceuticals Inc. Occupation VP Commercial Operations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1050.00**

Date of Receipt **10 / 30 / 2012**
Transaction ID : 201212041391-2
 Amount of Each Receipt this Period **50.00**

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 34
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Millennium Pharmaceuticals Inc. PAC

A. Sandra DiCesare
Full Name (Last, First, Middle Initial)

Mailing Address 4 Shelly Ln

City Westford State MA Zip Code 01886-4522

FEC ID number of contributing federal political committee. **C**

Name of Employer Millennium Pharmaceuticals Inc. Occupation VP Commercial Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 15 / 2012
Transaction ID : 2012120413747-2

Amount of Each Receipt this Period
 50.00

B. Deborah Dunsire
Full Name (Last, First, Middle Initial)

Mailing Address 8 Highmeadow Rd

City Weston State MA Zip Code 02493-1941

FEC ID number of contributing federal political committee. **C**

Name of Employer Millennium Pharmaceuticals Inc. Occupation President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2012
Transaction ID : 2012120413832-16

Amount of Each Receipt this Period
 200.00

C. Deborah Dunsire
Full Name (Last, First, Middle Initial)

Mailing Address 8 Highmeadow Rd

City Weston State MA Zip Code 02493-1941

FEC ID number of contributing federal political committee. **C**

Name of Employer Millennium Pharmaceuticals Inc. Occupation President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2012
Transaction ID : 201212041391-16

Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 34
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Millennium Pharmaceuticals Inc. PAC

Full Name (Last, First, Middle Initial) A. Deborah Dunsire			Date of Receipt M M / D D / Y Y Y Y Y 11 / 15 / 2012 Transaction ID : 2012120413747-16
Mailing Address 8 Highmeadow Rd			Amount of Each Receipt this Period 200.00
City Weston	State MA	Zip Code 02493-1941	
FEC ID number of contributing federal political committee. C			
Name of Employer Millennium Pharmaceuticals Inc.	Occupation President & CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4200.00		

Full Name (Last, First, Middle Initial) B. Eleda Espinoza			Date of Receipt M M / D D / Y Y Y Y Y 11 / 15 / 2012 Transaction ID : 2012120413747-13
Mailing Address 21 Meadowview Dr			Amount of Each Receipt this Period 10.00
City Phillipsburg	State NJ	Zip Code 08865-7303	
FEC ID number of contributing federal political committee. C			
Name of Employer Millennium Pharmaceuticals Inc.	Occupation Health Systems Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) C. David Gibbs			Date of Receipt M M / D D / Y Y Y Y Y 10 / 15 / 2012 Transaction ID : 2012120413832-45
Mailing Address 5 Lakeview Pointe Ct			Amount of Each Receipt this Period 25.00
City Lake St Louis	State MO	Zip Code 63367-4324	
FEC ID number of contributing federal political committee. C			
Name of Employer Millennium Pharmaceuticals Inc.	Occupation Regional Sales Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

SUBTOTAL of Receipts This Page (optional).....▶	235.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Millennium Pharmaceuticals Inc. PAC

Full Name (Last, First, Middle Initial)
A. David Gibbs

Mailing Address 5 Lakeview Pointe Ct

City State Zip Code
Lake St Louis MO 63367-4324

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Millennium Pharmaceuticals Inc. Regional Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 30 / 2012
Transaction ID : 201212041391-45

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. David Gibbs

Mailing Address 5 Lakeview Pointe Ct

City State Zip Code
Lake St Louis MO 63367-4324

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Millennium Pharmaceuticals Inc. Regional Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 15 / 2012
Transaction ID : 2012120413747-45

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. William Hamarich

Mailing Address 28 Ambassador Way

City State Zip Code
Jackson NJ 08527-2881

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Millennium Pharmaceuticals Inc. Sr. Oncology Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2012
Transaction ID : 2012120413832-43

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Millennium Pharmaceuticals Inc. PAC

Full Name (Last, First, Middle Initial)
A. William Hamarich

Mailing Address 28 Ambassador Way

City Jackson State NJ Zip Code 08527-2881

FEC ID number of contributing federal political committee. **C**

Name of Employer Millennium Pharmaceuticals Inc. Occupation Sr. Oncology Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt
10 / 30 / 2012

Transaction ID : 201212041391-43

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. William Hamarich

Mailing Address 28 Ambassador Way

City Jackson State NJ Zip Code 08527-2881

FEC ID number of contributing federal political committee. **C**

Name of Employer Millennium Pharmaceuticals Inc. Occupation Sr. Oncology Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt
11 / 15 / 2012

Transaction ID : 2012120413747-43

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. James Holmes

Mailing Address 4 Avalon Way

City Altamont State NY Zip Code 12009-3720

FEC ID number of contributing federal political committee. **C**

Name of Employer Millennium Pharmaceuticals Inc. Occupation Sr. Manager, Sales Training

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt
10 / 15 / 2012

Transaction ID : 2012120413832-30

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ► **120.00**

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Millennium Pharmaceuticals Inc. PAC

Full Name (Last, First, Middle Initial)
A. James Holmes

Mailing Address 4 Avalon Way

City Altamont State NY Zip Code 12009-3720

FEC ID number of contributing federal political committee. **C**

Name of Employer Millennium Pharmaceuticals Inc. Occupation Sr. Manager, Sales Training

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2012

Transaction ID : 201212041391-30

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
B. James Holmes

Mailing Address 4 Avalon Way

City Altamont State NY Zip Code 12009-3720

FEC ID number of contributing federal political committee. **C**

Name of Employer Millennium Pharmaceuticals Inc. Occupation Sr. Manager, Sales Training

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2012

Transaction ID : 2012120413747-30

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
C. Joyce Kinsey

Mailing Address 1691 Baltimore Annapolis Blvd

City Arnold State MD Zip Code 21012-2543

FEC ID number of contributing federal political committee. **C**

Name of Employer Millennium Pharmaceuticals Inc. Occupation Sr. Oncology Sales Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2012

Transaction ID : 2012120413747-41

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **50.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Millennium Pharmaceuticals Inc. PAC

Full Name (Last, First, Middle Initial) A. Elizabeth Lewis		Date of Receipt M M / D D / Y Y Y Y Y 10 / 15 / 2012 Transaction ID : 2012120413832-4
Mailing Address 32 Cressbrook Rd		Amount of Each Receipt this Period 50.00
City Concord	State MA	
Zip Code 01742-5304		Aggregate Year-to-Date ▼ 1050.00
FEC ID number of contributing federal political committee. C		
Name of Employer Millennium Pharmaceuticals Inc.	Occupation VP, Commercial Law	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Elizabeth Lewis		Date of Receipt M M / D D / Y Y Y Y Y 10 / 30 / 2012 Transaction ID : 201212041391-4
Mailing Address 32 Cressbrook Rd		Amount of Each Receipt this Period 50.00
City Concord	State MA	
Zip Code 01742-5304		Aggregate Year-to-Date ▼ 1050.00
FEC ID number of contributing federal political committee. C		
Name of Employer Millennium Pharmaceuticals Inc.	Occupation VP, Commercial Law	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Elizabeth Lewis		Date of Receipt M M / D D / Y Y Y Y Y 11 / 15 / 2012 Transaction ID : 2012120413747-4
Mailing Address 32 Cressbrook Rd		Amount of Each Receipt this Period 50.00
City Concord	State MA	
Zip Code 01742-5304		Aggregate Year-to-Date ▼ 1050.00
FEC ID number of contributing federal political committee. C		
Name of Employer Millennium Pharmaceuticals Inc.	Occupation VP, Commercial Law	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Millennium Pharmaceuticals Inc. PAC

A. Sabina McCafferty
 Full Name (Last, First, Middle Initial)
 Mailing Address 2639 Pointewood Loop
 City Galena State OH Zip Code 43021-8577
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Millennium Pharmaceuticals Inc. Occupation Health Systems Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2012
Transaction ID : 2012120413832-32
 Amount of Each Receipt this Period
 15.00

B. Sabina McCafferty
 Full Name (Last, First, Middle Initial)
 Mailing Address 2639 Pointewood Loop
 City Galena State OH Zip Code 43021-8577
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Millennium Pharmaceuticals Inc. Occupation Health Systems Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2012
Transaction ID : 201212041391-32
 Amount of Each Receipt this Period
 15.00

C. Sabina McCafferty
 Full Name (Last, First, Middle Initial)
 Mailing Address 2639 Pointewood Loop
 City Galena State OH Zip Code 43021-8577
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Millennium Pharmaceuticals Inc. Occupation Health Systems Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 15 / 2012
Transaction ID : 2012120413747-32
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Millennium Pharmaceuticals Inc. PAC

Full Name (Last, First, Middle Initial) A. Susan McFadden		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 15 / 2012 Transaction ID : 2012120413747-14
Mailing Address 855 La Mirada St		Amount of Each Receipt this Period 60.00
City Laguna Beach	State CA	
Zip Code 92651-3752		Amount of Each Receipt this Period 210.00
FEC ID number of contributing federal political committee. C		
Name of Employer Millennium Pharmaceuticals Inc.	Occupation Regional Sales Manager	Amount of Each Receipt this Period 210.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) B. Isabelle Mercier		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2012 Transaction ID : 2012120413832-37
Mailing Address 350th Third St. #1008		Amount of Each Receipt this Period 25.00
City Cambridge	State MA	
Zip Code 02142		Amount of Each Receipt this Period 525.00
FEC ID number of contributing federal political committee. C		
Name of Employer Millennium Pharmaceuticals Inc.	Occupation VP Marketing	Amount of Each Receipt this Period 525.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

Full Name (Last, First, Middle Initial) C. Isabelle Mercier		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2012 Transaction ID : 201212041391-37
Mailing Address 350th Third St. #1008		Amount of Each Receipt this Period 25.00
City Cambridge	State MA	
Zip Code 02142		Amount of Each Receipt this Period 525.00
FEC ID number of contributing federal political committee. C		
Name of Employer Millennium Pharmaceuticals Inc.	Occupation VP Marketing	Amount of Each Receipt this Period 525.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 34
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Millennium Pharmaceuticals Inc. PAC

A. Isabelle Mercier
Full Name (Last, First, Middle Initial)

Mailing Address 350th Third St. #1008

City Cambridge State MA Zip Code 02142

FEC ID number of contributing federal political committee. **C**

Name of Employer Millennium Pharmaceuticals Inc. Occupation VP Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt **11 / 15 / 2012**

Transaction ID : 2012120413747-37

Amount of Each Receipt this Period **25.00**

B. Amy Modean
Full Name (Last, First, Middle Initial)

Mailing Address 8312 Deer Pond Trl N

City Lake Elmo State MN Zip Code 55042-9523

FEC ID number of contributing federal political committee. **C**

Name of Employer Millennium Pharmaceuticals Inc. Occupation Health Systems Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt **10 / 15 / 2012**

Transaction ID : 2012120413832-40

Amount of Each Receipt this Period **25.00**

C. Amy Modean
Full Name (Last, First, Middle Initial)

Mailing Address 8312 Deer Pond Trl N

City Lake Elmo State MN Zip Code 55042-9523

FEC ID number of contributing federal political committee. **C**

Name of Employer Millennium Pharmaceuticals Inc. Occupation Health Systems Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt **10 / 30 / 2012**

Transaction ID : 201212041391-40

Amount of Each Receipt this Period **25.00**

SUBTOTAL of Receipts This Page (optional)..... **75.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Millennium Pharmaceuticals Inc. PAC

A. Amy Modean
Full Name (Last, First, Middle Initial)

Mailing Address 8312 Deer Pond Trl N

City Lake Elmo	State MN	Zip Code 55042-9523
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Millennium Pharmaceuticals Inc.	Occupation Health Systems Manager
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 15 / 2012
Transaction ID : 2012120413747-40

Amount of Each Receipt this Period
 25.00

B. Karen Odierna
Full Name (Last, First, Middle Initial)

Mailing Address 5586 Modena Pl

City Sarasota	State FL	Zip Code 34238-6210
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Millennium Pharmaceuticals Inc.	Occupation Sr. Oncology Sales Specialist
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 15 / 2012
Transaction ID : 2012120413747-9

Amount of Each Receipt this Period
 10.00

C. Marc Peart
Full Name (Last, First, Middle Initial)

Mailing Address 17945 Stillmore St

City Canyon Country	State CA	Zip Code 91387-3516
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Millennium Pharmaceuticals Inc.	Occupation Sr. Oncology Sales Specialist
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 15 / 2012
Transaction ID : 2012120413747-34

Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Millennium Pharmaceuticals Inc. PAC

Full Name (Last, First, Middle Initial) A. Kim Pierwoka		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2012 Transaction ID : 2012120413832-48
Mailing Address 46 Harbour View Pl		Amount of Each Receipt this Period 25.00
City Stratford	State CT	Zip Code 06615-7008
FEC ID number of contributing federal political committee. C	Name of Employer Millennium Pharmaceuticals Inc.	
Occupation Sr. Oncology Sales		Aggregate Year-to-Date ▼ 400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Kim Pierwoka		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2012 Transaction ID : 201212041391-48
Mailing Address 46 Harbour View Pl		Amount of Each Receipt this Period 25.00
City Stratford	State CT	Zip Code 06615-7008
FEC ID number of contributing federal political committee. C	Name of Employer Millennium Pharmaceuticals Inc.	
Occupation Sr. Oncology Sales		Aggregate Year-to-Date ▼ 400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Kim Pierwoka		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 15 / 2012 Transaction ID : 2012120413747-48
Mailing Address 46 Harbour View Pl		Amount of Each Receipt this Period 25.00
City Stratford	State CT	Zip Code 06615-7008
FEC ID number of contributing federal political committee. C	Name of Employer Millennium Pharmaceuticals Inc.	
Occupation Sr. Oncology Sales		Aggregate Year-to-Date ▼ 400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 34
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Millennium Pharmaceuticals Inc. PAC

Full Name (Last, First, Middle Initial) A. Joe Regan			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2012 Transaction ID : 2012120413832-27
Mailing Address 3 Legion Rd			Amount of Each Receipt this Period 50.00
City Weston	State MA	Zip Code 02493-2119	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 1050.00	
Name of Employer Millennium Pharmaceuticals Inc.		Occupation VP, US Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Joe Regan			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2012 Transaction ID : 201212041391-27
Mailing Address 3 Legion Rd			Amount of Each Receipt this Period 50.00
City Weston	State MA	Zip Code 02493-2119	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 1050.00	
Name of Employer Millennium Pharmaceuticals Inc.		Occupation VP, US Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Joe Regan			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 15 / 2012 Transaction ID : 2012120413747-27
Mailing Address 3 Legion Rd			Amount of Each Receipt this Period 50.00
City Weston	State MA	Zip Code 02493-2119	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 1050.00	
Name of Employer Millennium Pharmaceuticals Inc.		Occupation VP, US Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Millennium Pharmaceuticals Inc. PAC

A. Sara Riedel
 Full Name (Last, First, Middle Initial)
 Mailing Address 22370 Cypress Wood Ln
 City Boca Raton State FL Zip Code 33428-3845
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Millennium Pharmaceuticals Inc. Occupation Sr. Oncology Sales Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2012
Transaction ID : 2012120413832-26
 Amount of Each Receipt this Period
 20.00

B. Sara Riedel
 Full Name (Last, First, Middle Initial)
 Mailing Address 22370 Cypress Wood Ln
 City Boca Raton State FL Zip Code 33428-3845
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Millennium Pharmaceuticals Inc. Occupation Sr. Oncology Sales Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2012
Transaction ID : 201212041391-26
 Amount of Each Receipt this Period
 20.00

C. Sara Riedel
 Full Name (Last, First, Middle Initial)
 Mailing Address 22370 Cypress Wood Ln
 City Boca Raton State FL Zip Code 33428-3845
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Millennium Pharmaceuticals Inc. Occupation Sr. Oncology Sales Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 15 / 2012
Transaction ID : 2012120413747-26
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 34
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Millennium Pharmaceuticals Inc. PAC

A. Warren Rohal
Full Name (Last, First, Middle Initial)
Mailing Address 29655 Fran Drive

City Evergreen	State CO	Zip Code 80439
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Millennium Pharmaceuticals Inc.	Occupation Sr. Oncology Sales Specialist
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2012

Transaction ID : 2012120413832-17

Amount of Each Receipt this Period

15.00

B. Warren Rohal
Full Name (Last, First, Middle Initial)
Mailing Address 29655 Fran Drive

City Evergreen	State CO	Zip Code 80439
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Millennium Pharmaceuticals Inc.	Occupation Sr. Oncology Sales Specialist
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2012

Transaction ID : 201212041391-17

Amount of Each Receipt this Period

15.00

C. Warren Rohal
Full Name (Last, First, Middle Initial)
Mailing Address 29655 Fran Drive

City Evergreen	State CO	Zip Code 80439
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Millennium Pharmaceuticals Inc.	Occupation Sr. Oncology Sales Specialist
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2012

Transaction ID : 2012120413747-17

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 27 OF 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Millennium Pharmaceuticals Inc. PAC

Full Name (Last, First, Middle Initial)
A. Thomas Rotte

Mailing Address 4530 Promenade Ln

City State Zip Code
 Sylvania OH 43560-2984

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Millennium Pharmaceuticals Inc. Health Systems Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2012
Transaction ID : 2012120413832-38

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
B. Thomas Rotte

Mailing Address 4530 Promenade Ln

City State Zip Code
 Sylvania OH 43560-2984

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Millennium Pharmaceuticals Inc. Health Systems Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2012
Transaction ID : 201212041391-38

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
C. Thomas Rotte

Mailing Address 4530 Promenade Ln

City State Zip Code
 Sylvania OH 43560-2984

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Millennium Pharmaceuticals Inc. Health Systems Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 15 / 2012
Transaction ID : 2012120413747-38

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Millennium Pharmaceuticals Inc. PAC

Full Name (Last, First, Middle Initial) A. Elizabeth Rush		Date of Receipt
Mailing Address 7331 Booth St		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code
Prairie Village	KS	66208-3358
FEC ID number of contributing federal political committee.		Transaction ID : 2012120413832-3
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
Millennium Pharmaceuticals Inc.	Sr. Oncology Sales Specialist	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="525.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Elizabeth Rush		Date of Receipt
Mailing Address 7331 Booth St		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City	State	Zip Code
Prairie Village	KS	66208-3358
FEC ID number of contributing federal political committee.		Transaction ID : 201212041391-3
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
Millennium Pharmaceuticals Inc.	Sr. Oncology Sales Specialist	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="525.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Elizabeth Rush		Date of Receipt
Mailing Address 7331 Booth St		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code
Prairie Village	KS	66208-3358
FEC ID number of contributing federal political committee.		Transaction ID : 2012120413747-3
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
Millennium Pharmaceuticals Inc.	Sr. Oncology Sales Specialist	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="525.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="75.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Millennium Pharmaceuticals Inc. PAC

A. Robert Slomka
 Full Name (Last, First, Middle Initial)
 Mailing Address 206 Forest Knoll Ct
 City Fishers State IN Zip Code 46037-9753
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Millennium Pharmaceuticals Inc. Occupation Regional Sales Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2012
Transaction ID : 2012120413832-29
 Amount of Each Receipt this Period
 25.00

B. Robert Slomka
 Full Name (Last, First, Middle Initial)
 Mailing Address 206 Forest Knoll Ct
 City Fishers State IN Zip Code 46037-9753
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Millennium Pharmaceuticals Inc. Occupation Regional Sales Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2012
Transaction ID : 201212041391-29
 Amount of Each Receipt this Period
 25.00

C. Robert Slomka
 Full Name (Last, First, Middle Initial)
 Mailing Address 206 Forest Knoll Ct
 City Fishers State IN Zip Code 46037-9753
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Millennium Pharmaceuticals Inc. Occupation Regional Sales Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 15 / 2012
Transaction ID : 2012120413747-29
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 30 OF 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Millennium Pharmaceuticals Inc. PAC

A. Mary Wadlinger
 Full Name (Last, First, Middle Initial)
 Mailing Address 19 Holly Ridge Rd
 City North Andover State MA Zip Code 01845-4732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Millennium Pharmaceuticals Inc. Occupation Sr. Dir., Human Resources
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 10 / 15 / 2012
Transaction ID : 2012120413832-5
 Amount of Each Receipt this Period 15.00

B. Mary Wadlinger
 Full Name (Last, First, Middle Initial)
 Mailing Address 19 Holly Ridge Rd
 City North Andover State MA Zip Code 01845-4732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Millennium Pharmaceuticals Inc. Occupation Sr. Dir., Human Resources
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 10 / 30 / 2012
Transaction ID : 201212041391-5
 Amount of Each Receipt this Period 15.00

C. Mary Wadlinger
 Full Name (Last, First, Middle Initial)
 Mailing Address 19 Holly Ridge Rd
 City North Andover State MA Zip Code 01845-4732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Millennium Pharmaceuticals Inc. Occupation Sr. Dir., Human Resources
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 11 / 15 / 2012
Transaction ID : 2012120413747-5
 Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 31 OF 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Millennium Pharmaceuticals Inc. PAC

A. Jim Weber
 Full Name (Last, First, Middle Initial)
 Mailing Address 2913 Q Ave
 City Parnell State IA Zip Code 52325-8842
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Millennium Pharmaceuticals Inc. Occupation Sales Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2012
Transaction ID : 2012120413832-10
 Amount of Each Receipt this Period
 25.00

B. Jim Weber
 Full Name (Last, First, Middle Initial)
 Mailing Address 2913 Q Ave
 City Parnell State IA Zip Code 52325-8842
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Millennium Pharmaceuticals Inc. Occupation Sales Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2012
Transaction ID : 201212041391-10
 Amount of Each Receipt this Period
 25.00

C. Jim Weber
 Full Name (Last, First, Middle Initial)
 Mailing Address 2913 Q Ave
 City Parnell State IA Zip Code 52325-8842
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Millennium Pharmaceuticals Inc. Occupation Sales Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 15 / 2012
Transaction ID : 2012120413747-10
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 34
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Millennium Pharmaceuticals Inc. PAC

Full Name (Last, First, Middle Initial)
A. Gayle Williams

Mailing Address 114 Carriage Ln

City Logan Twp State NJ Zip Code 08085-1550

FEC ID number of contributing federal political committee. **C**

Name of Employer Millennium Pharmaceuticals Inc. Occupation Sr. Oncology Sales Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2012

Transaction ID : 2012120413832-46

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Gayle Williams

Mailing Address 114 Carriage Ln

City Logan Twp State NJ Zip Code 08085-1550

FEC ID number of contributing federal political committee. **C**

Name of Employer Millennium Pharmaceuticals Inc. Occupation Sr. Oncology Sales Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2012

Transaction ID : 201212041391-46

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Gayle Williams

Mailing Address 114 Carriage Ln

City Logan Twp State NJ Zip Code 08085-1550

FEC ID number of contributing federal political committee. **C**

Name of Employer Millennium Pharmaceuticals Inc. Occupation Sr. Oncology Sales Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2012

Transaction ID : 2012120413747-46

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 34
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Millennium Pharmaceuticals Inc. PAC

A. Brent Wingerson
Full Name (Last, First, Middle Initial)
Mailing Address 5311 NE 24th Ct

City Newcastle	State WA	Zip Code 98059-3714
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Millennium Pharmaceuticals Inc.	Occupation Sr. Oncology Sales Specialist
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2012

Transaction ID : 2012120413832-22

Amount of Each Receipt this Period
25.00

B. Brent Wingerson
Full Name (Last, First, Middle Initial)
Mailing Address 5311 NE 24th Ct

City Newcastle	State WA	Zip Code 98059-3714
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Millennium Pharmaceuticals Inc.	Occupation Sr. Oncology Sales Specialist
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2012

Transaction ID : 201212041391-22

Amount of Each Receipt this Period
25.00

C. Brent Wingerson
Full Name (Last, First, Middle Initial)
Mailing Address 5311 NE 24th Ct

City Newcastle	State WA	Zip Code 98059-3714
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Millennium Pharmaceuticals Inc.	Occupation Sr. Oncology Sales Specialist
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2012

Transaction ID : 2012120413747-22

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 34 OF 34
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Millennium Pharmaceuticals Inc. PAC

Full Name (Last, First, Middle Initial)
A. Michael Zdrojewski

Mailing Address 57 Christian Way

City North Andover State MA Zip Code 01845-2233

FEC ID number of contributing federal political committee. **C**

Name of Employer Millennium Pharmaceuticals Inc. Occupation Director, Sales Strategy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2012

Transaction ID : 2012120413832-33

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Michael Zdrojewski

Mailing Address 57 Christian Way

City North Andover State MA Zip Code 01845-2233

FEC ID number of contributing federal political committee. **C**

Name of Employer Millennium Pharmaceuticals Inc. Occupation Director, Sales Strategy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2012

Transaction ID : 201212041391-33

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Michael Zdrojewski

Mailing Address 57 Christian Way

City North Andover State MA Zip Code 01845-2233

FEC ID number of contributing federal political committee. **C**

Name of Employer Millennium Pharmaceuticals Inc. Occupation Director, Sales Strategy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 15 / 2012

Transaction ID : 2012120413747-33

Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	3090.00